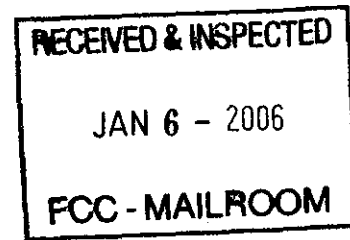


COB-CC-0255

True Church of God in Christ
236 Baker Street
Savannah, GA. 31415



FCC Commission
445 12th Street SW
Washington, DC 20554

To Whom It May Concern:

I am sending an application for exemption from Closed Caption. This would cause undue burden and result in our program having to be removed from the air. It is our sincere hope that consideration will be given to this application that we may continue to spread the good news of the gospel without having to leave the air.

Sincerely,

Elder Marvin Jones Sr.

Elder Marvin Jones Sr.
Pastor

Cc: WJCL - ABC 22

Exemption from Closed Captioning: Undue Burden

Name and Address of organization:

True Church of God in Christ, Inc.
236 Baker St. SAVANNAH, GA. 314

Name & title of contact person: MARVIN JONES SR., ElderPhone number & e-mail address: 706 793-5046
ELDER MARVIN JONES (@) YAHOO.COM.

Instructions: Please provide responses to the following items. You should submit documentation to support your statements, particularly those related to your finances. There is no need to limit replies to the space provided. The more information included in your petition, the greater the likelihood of success in obtaining an exemption.

1. Describe the organization and nature of its operations, including for profit/non-profit status, business purpose or mission, and primary activities (examples: education, ministry, public service, etc.).

SAVANNAH True Church of God in Christ is, A
NON-Profit organization. Total membership 33, including
Children. Our mission is to win souls for Christ,
through public services of Teaching And Preaching to
Bible. The word of God.

2. Give a brief description of the programming and its intended purpose.

We are Presently on A local SAVANNAH TV Station,
WJCL ABC 22. No charge to the public. \$150.00
Per 30 minute telecast. Intended purpose is to
Educate in Righteousness And to proclaim the NAME of Jesus Christ.

3. Give a specific description of the methods and costs of closed captioning the programming. You may wish to contact the station(s) to get more details about the type of captioning used as well the costs of services, equipment and maintenance.

One method of closed captioning would be to send our
tapes to AN outside contractor AT A cost of \$200.00
to \$250.00 Per tape. Another would be to purchase
Additional equipment, up to \$50,000.00, in talking to the
STATION MANAGER.

4. Does the expense associated with captioning require you to seek additional funds or curtail development and investment in other aspects of your organization? Does it have any other negative effect on your operations? Please explain fully.

Due to SMALL local membership and limited financial support, we would be forced off the Air. At the present time we have not received viewer support.

We are on the Air late because earlier time slots are far more costly. We would have to get off the Air if no (non closed caption) time slots are available.

5. Please describe your finances and resources. You should be sure to include the documents supporting your description, such as annual reports, balance statements, tax forms, and/or any other material depicting your cash flow, when you send back this questionnaire.

Finances and support comes from the membership in Tithes and offering. Total weekly offerings \$340.00 - 375.00

Bible Study 40.00

Regular Offering 275.00

Community Service 25.00

Total $340.00 \times 4 = 1360 \times 12 = \$16,320.00$ ANNUAL

6. List other relevant factors that demonstrate the burden of closed captioning requirements. Does it harm relations with other organizations or affect timing and delivery of programming? Any way in which the requirements would make day-to-day functioning harder should be mentioned.

Currently we ARE on the Air from 0130 AM to 0200 AM. This time period was chosen because we ARE able to afford it with continual sacrifice.

On the Air (1) night per week 0130-0200 AM on Sunday morning.

If no non closed caption time are available, we would have to get off the Air.

7. Offer examples of one or more alternatives to closed captioning that would both be feasible for your organization and make programming readily accessible to the hearing impaired.

Currently we do not have an alternative. Additional expenses would be an undue burden and we would be forced off the air.

We do offer written text free of charge on the internet WWW.TheTrueChurch.ORG.

Elder Marvin Jones Sr.

Elder Marvin Jones Sr.

WJCL ABC 22
10001 ABERCORN ST.
SAVANNAH, GA 31406



PHONE: (912) 925-0022
FAX: (912) 921-2218
E-MAIL: accountsreceivable@wjcl.com

WJCL INVOICE/AFFIDAVIT

REPRESENTATIVE	SALESPERSON
	DIMSDALE, DEWEY NB
ADVERTISER	PRODUCT
TRUE COGIC-CIA	TRUE COGIC-CIA

ORDER TYPE	AGENCY ESTIMATE NO.
ORIGINAL	
INVOICE NUMBER	BROADCAST MONTH
INV# 8176-41	11/01-11/30/05
SCHEDULE DATES	BILLING PERIOD
10/24-12/24/05	MONTHLY

TRUE COGIC
3635 CAMERON DRIVE
AUGUSTA, GA
CLDER HARVIN JONES
30906

TERMS: DUE AND PAYABLE 10 DAYS AFTER DATE OF INVOICE.

SCHEDULE										ACTUAL BROADCAST							RECONCILIATION			
A	TU	W	TH	F	SA	SU	TIME	RATE	NO.	DATES	DAY	TIME	TYPE MIN SEC		M/G FOR	COPY NUMBER	RATE	DEBIT	CREDIT	REMARKS
					X		01:30AM	150.00	4	11/05	SA	138A	30	00		TRUE COG	150.00			
										11/12	SA	130A	30	00		TRUE COG	150.00			
										11/19	SA	130A	30	00		TRUE COG	150.00			
										11/26	SA	131A	30	00		TRUE COG	150.00			
SCHEDULE COST FOR THIS BILLING PERIOD										ACTUAL GROSS BILLING		AGENCY COMMISSION		NET DUE		SUB-TOTALS		RECONCILIATION		
600.00										600.00				600.00						

STATE OF GEORGIA, COUNTY OF CHATHAM:

Before me, a Notary Public, personally appeared

_____ who being duly sworn deposes and says that

he is the _____ of Station WCCB-TV and that the

telecasts as shown above were duly made on the dates specified.

Sworn to and subscribed before me this _____ day of _____, 20____.

_____ N.P.

INVOICE / AFFIDAVIT

PLEASE INCLUDE INVOICE NUMBERS WITH PAYMENT

PLEASE INCLUDE INVOICE NUMBERS WITH PAYMENT

INVOICE / AFFIDAVIT

STATE OF GEORGIA, COUNTY OF CHATHAM:
Before me, a Notary Public, personally appeared _____ who being duly sworn deposes and says that he is the _____ of WJCL-TV and that the telecasts as shown above were duly made on the dates specified.
Sworn to and subscribed before me this _____ day of _____, 20____ N.P.